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In re: **Blake Earl Hayward**  
 Case: **P3953** Application No.: **09/681,589**  
 Art Unit: **2155** Examiner: **Benjamin R. Bruckart**  
 Subject: **Network-Based Verification and Fraud-Prevention System**

Filing date: **09/14/2000**

**Certificate of Transmission under 37 CFR 1.8**

Attention: **Benjamin R. Bruckart, Examiner**

Fax No.: **(571) 273-8300**

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CASE DOCKET NO. P3953

In reference to application of Blake Earl Hayward

Serial No. 09/661,589

For Network-Based Verification and Fraud-Prevention System

Sir:

Transmitted herewith is and an amendment in the above-identified application, under 37 C.F.R. 1.312.

- No additional fee is required.  
 Applicant claims Small entity status under 37 CFR 1.27.  
 The fee has been calculated as shown below.

## \*\*\*\*\* CLAIMS AS AMENDED \*\*\*\*\*

| (1)   | (2)                                | (3)   | (4)   | (5)           | (6)                                | (7)               | (8)            |
|---|------------------------------------|-------|---|---------------|------------------------------------|-------------------|----------------|
|   | Claims Remaining After Amendment   |       | Highest No. Paid For Previously               | Present Extra | Rate Small Entity                  | Rate Large Entity | Additional Fee |
| Total Claims  | 8                                  | Minus | ** 28   | 0             | \$ 25                              | \$ 50             | \$ 0.00        |
| Indep Claims  | 2                                  | Minus | *** 3   | 0             | \$ 100                             | \$ 200            | \$ 0.00        |
| <input type="checkbox"/> First presentation of a multiple dependent claim |                                    |       |   |               | \$ 0                               | \$ 0              | \$ 0.00        |
| <input type="checkbox"/> Terminal Disclaimer Fees                         |                                    |       |   |               |                                    |                   | \$ 0.00        |
| Extension Fee   | <input type="checkbox"/> 1st Month |       | <input checked="" type="checkbox"/> 2nd Month |               | <input type="checkbox"/> 3rd Month |                   | \$ 460.00      |
| Total additional for claims, time extensions and disclaimer fees          |                                    |       |   |               |                                    |                   | \$ 460.00      |

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\*\*\*\* Multiple dependencies, if any, included in the above calculation.

\* If the entry in column 2 is less than the entry in column 4, write "0" in column 5.

 A check in the amount of 0.00 is attached. Charge \$ 460.00 to deposit account 50-0534 (A duplicate of this sheet is enclosed) Please charge any additional fees or credit overpayment to Deposit Account 50-0534. A duplicate of this sheet is enclosed.Respectfully Submitted, /Donald R. Boys/Donald R. Boys  
Reg. No. 35074Central Coast Patent Agency, Inc.  
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| <input type="checkbox"/> Terminal Disclaimer Fees                         |                                    |   |                                    |               |                   |                   | \$ 0.00        |  |
| Extension Fee   | <input type="checkbox"/> 1st Month | <input checked="" type="checkbox"/> 2nd Month | <input type="checkbox"/> 3rd Month |               |                   |                   | \$ 460.00      |  |
| Total additional for claims, time extensions and disclaimer fees          |                                    |   |                                    |               |                   |                   | \$ 460.00      |  |

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